PATENT APPEATION FEE DETERMINATION REC Effective December 8, 2004

Application or Docket Number

D-S3131/

		CLAIMS	S AS FILE	D - PART	1	•		01444				
			(Ce	olumn 1)	(Column 2)			SMALL E	YIIIY	OF		R THAN - ENTITY
U.S. NATIONAL STAGE FEES			5		·		7	RATE	FEE	j	RATE	FEE
BASIC FEE			SMALL	ENT. = \$ 150	LAI	RGE ENT. = \$ 300	7	BASIC FEE	+		BASIC FEE	
EXAMINATION FEE				CT Article 33(1)- \$ 50 / \$ 100	All	other situations =	1	EXAM. FEE	-	- "		300
SEARCH FEE			U.S. is ISA ALL othe	U.S. is ISA = \$ 50 /\$ 100 ALL other countries = \$ 200 /\$ 400		\$ 100 / \$ 200 other situations = \$ 250 / \$ 500	1	SEARCH FEE		1	SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.				minus 100 =		/ 50 =	1	X \$ 125 =	 	1	X \$ 250 =	╁
TOTAL CHARGEABLE CLAIMS			18	minus 20 =	*		1	X \$ 25 =	 	OR	 	
INDEPENDENT CLAIMS			12	minus 3 =	*		1	X \$ 100 =	 	OR		
MU	LTIPLE DEPE	NDENT CLAIM P	RESENT				1	+ \$ 180 =	 	-		
* #	the difference	e in column 1 is	s less than z	ero, enter "0	" in c	olumn 2	1	TOTAL	<u> </u>	OR	+ \$ 360 =	
						· · · · · ·		····		OR	TOTAL	
		CLAIMS AS (Column 1)	ED - PART (Colum		(Column 3)		SMALL	ENTITY	ÓR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	 -
					· ·			TOTAL ADDIT. FEE	-10.	OR	TOTAL ADDIT.	
						,		140			FEE	<u> </u>
_		(Column 1)		(Column	<u> </u>	(Column 3)	r	· · · · · · · · · · · · · · · · · · ·		-		
2		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ſ	X \$ 25 =		OR	X \$ 50 =	•
	Independent	*	Minus	***		=		X \$ 100 =		or	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				AIM		1	+ \$ 180 =		OR	+ \$ 360 =	
							I _	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
			•							•	LEC F	
	f the enterior cal-	4 1-4										
t	f the "Highest Nu	mn 1 is less than the mber Previously Pai	d For IN THIS :	SPACE is less th	an '20'	enter "20"						
ti	f the "Highest Nu	mber Previously Paid ther Previously Paid	For IN THIS	SPACE is less th	an '3'.	enter "3".	the:	appropriate hav i	n Column 4			
			•		J				· waitii I.			